filed 17 November 2000

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United Kingdom

Country

(if any), the specification and claims of which I have reviewed

Declaration and Power of Attorney **Under Patent Cooperation Treaty** 35 USC §371(c)(4)

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural invento age pamed below) of the invention entitled: Optical Measuring Apparatus For Measuring Objects on Machines

I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, \$1.56(a), and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to my international application by me or my

As a below named inventor, I hereby declare that:

and understand and for which I solicit a patent.

legal representatives or assigns, except as follows:

and as amended on

Inventor's Signature

Avening

United Kingdom

City

Post Office Address

(Insert complete mailing address, including country)

*5 Date of Signature

Residence

Citizenship

my residence, post office address and citizenship are as stated below next to my name; t	nat
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described and claimed in international application number PCT/GB00/04403

	United Kingdom	Patent Application	on No. 99274 on No. 00209	71.4 filed 22 Novem 29.6 filed 25 Augus	ber 1999 t 2000
	The priority of the a mider 35 USC 119. I her prosecute this application	bove applications (if any), file by appoint the following as a and to transact all business in t	ed within a year prior ny attorneys of recor he Patent Office:	or to my international application d with full power of substitution 0.024: Kirk M. Hudson, Reg. N	is hereby claimed and revocation to
5	7	homas J. Pardini, Reg. No	WITH THIS APP	LICATION SHOULD BE SEN	
	I hereby declare that in yown knowledge are tr statements were made wi	I have reviewed and understar ue and that all statements mad	nd the contents of this e on information and	s Declaration, and that all statems belief are believed to be true; an the like so made are punishable be that such willful false statements	y fine or imprison-
3	Full name of Sole	Victor	G	Stimpson	
a,	or First Inventor	Given Name	Middle Initial	Family Name	

Month

State or Province

Gloucestershire

Field House, Tetbury Hill, Avening,

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^{*}Note to Inventor: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

** Residence City United Kingdom ** Post Office Address (Insert complete mailing address, including country) ** Inventor's Signature ** Post Office Address (Insert complete mailing address, including country) ** Inventor's Signature ** Inventor's Signature ** Post Office Address (Insert complete mailing address, including country) ** Inventor's Signature ** South Gloucestershire Pamily Name ** South Gloucestershire Country ** South Gloucestershire Country ** South Gloucestershire Pamily Name ** South Gloucestershire Pamily Name ** South Gloucestershire Pamily Name ** South Gloucestershire, BS35 1TB, Norman J Leete ** South Gloucestershire, BS35 1TB, Norman J Leete ** South Gloucestershire Pamily Name ** South Gloucestershire, BS35 1TB, Norman J Leete ** South Gloucestershire United South Gloucestershire, BS35 1TB, Norman J Leete ** South Gloucestershire United South Gloucestershire, BS35 1TB, Norman J Leete ** South Gloucestershire United South Gloucestershire, BS35 1TB, Norman J Leete ** South Gloucestershire, BS36 1TB, Norman J Leete ** Office Address (Insert complete mailing Given Name ** Gloucestershire, BS16 7EA, William K Davies South Gloucestershire, BS16 7EA, William K Davies	United Kingd 200 Year Kingdom
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8 Post Office Address (Insert complete mailing address, including country) 106 Guest Avenue, Emersons Green South Gloucestershire, BS16 7EA, William K Davies 107 Third Joint Inventor (if any) 108 Third Joint Inventor (if any) 109 Third Joint Inventor (if any) 110 Squires Leaze, Thornbury, Br. South Gloucestershire 111 Squires Leaze, Thornbury, Br. South Gloucestershire, BS35 1TB, Morman 111 Typewritten Full Name of Given Name Middle Initial 112 Squires Leaze, Thornbury, Br. South Gloucestershire, BS35 1TB, Morman 113 Typewritten Full Name of Given Name Middle Initial 115 Squires Leaze, Thornbury, Br. South Gloucestershire, BS35 1TB, Morman 115 South Gloucestershire, BS35 1TB, South Glo	, Bristol United Kingd 200 Year Kingdom
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Colin T Bell	
3 Typewritten Full Name of Given Name Middle Initial Family Name Firth Joint Inventor (if any)	
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This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.